PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032

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			1	pont to a concent		nplete if Know		
Fees pursuant to the Cons	Tective on 12/08/2004 Iolidated Appropriati	i. ons Act, 2005 (H.R. 4	1818). A	pplication Num	ber	10/671,708-Cd	onf. #9259	9
FFF TI	RANSM	ITTAI	_	iling Date		September 29	2003	
				irst Named Inv	entor	Harry A. Dugg	er, III	
F	or FY 200	0	E	xaminer Name		M. Haghighatia	an	
X Applicant claims	small entity status.	See 37 CFR 1.27	A	rt Unit		1616		
TOTAL AMOUNT OF PA	YMENT	(\$) 465.00	A	ttorney Docket	No.	N9810.0026/P	026	
METHOD OF PAYN	/IENT (check all	that apply)						
Check X Cre		Money Order	None		please identi		in Shapire	o LLP
For the above-	identified deposit	account, the Dire	ctor is he	ereby authorize	d to: (che	ck all that apply)		
Charge fe	ee(s) indicated be	low		Charge	e fee(s) in	dicated below, e	cept for t	the filing fee
	ny additional fee(der 37 CFR 1.16		ents of	x Credit	any overp	ayments		
FEE CALCULATIO								
1. BASIC FILING, SEA		MINATION FEES						
Application Type		G FEES Small Entity		CH FEES Small Entity Fee (\$)	EXAMII	NATION FEES Small Entity Fee (\$)	Fees	Paid (\$)
Utility	310	155	510	255	210	105		
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		
2. EXCESS CLAIM FE	ES							Small Entity
Fee Description Each claim over 20 (in	cluding Reissnes	١					Fee (\$) 50	Fee (\$) 25
Each independent clair							200	100
Multiple dependent cla		ig reasones)					360	180
		Fee (\$)	Fee Pai	d (\$)	м	ultiple Depende		
-20=	x	=	1001 0	- (0)	_		ee Pald (
HP = highest number of tot	al claims paid for, if g	reater than 20.						
Indep. Claims E	xtra Claims I	ee (\$)	Fee Pai	d (\$)				
-3=	xx	= -						
HP = highest number of ind		tor, if greater than 3						
 APPLICATION SIZE If the specification an listings under 37 C sheets or fraction t 	d drawings exceed FR 1.52(e)), the	application size	fee due i	s \$260 (\$130 f				0
Total Sheets	Extra Sheets	Number of	each addi	tional 50 or frac	tion there	of Fee (\$)	Fee	Paid (\$)
	=	/50 =	(rc	ound up to a who	le number)	х		
4. OTHER FEE(S)							Fees	Paid (\$)
Non-English Specif	ication, \$130 fc	e (no small entity	discour	it)	at maa*!-		^	0.00
Other (e.g., late filir	ng surcharge): 2	251 Extension f 301 Request foi	or respo	onse within tir Jed examinat	st month ion (RCF) (see 37		0.00
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SUBMITTED BY	3/3/1/1	-/	Tpe	gistration No.				
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SUBMITTED BY	6/11/		
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